## What is Evidence-based Prevention?

Evidence-based prevention refers to a set of prevention activities that evaluation research has shown to be effective. Some activities help individuals develop the intentions and skills to act in a healthy manner. Others focus on creating environments that support healthy behavior. Sometimes, people refer to these as research- or science-based. For this purpose, all of these terms are synonymous.

Lately, we have seen a growing interest in evidence-based prevention. There are several explanations for this. The first has to do with accountability: With fewer dollars available for prevention, funders want to make sure that their money is being used wisely. Calls for accountability are strongest at the federal level, but are also mounting at the State level and among private foundations. Agencies simply don't have the funds to support many programs currently in use that look or sound good, but haven't been shown to produce positive outcomes.

People also know more about prevention now than they did a decade ago. There is now a good deal of evidence about what works and what doesn't. Many preventionists have done a lot of self-reflection and are working hard to keep focused on strategy and results. Also, increasing effort—and money—is going into sharing this knowledge, rather than keeping it within a specific program. For example, more federal money is currently going to communities to replicate large, successful projects rather than to design and implement new, untested programs.

Finally, the research of the last decade has shown us that not all prevention is good. We've discovered that prevention efforts can have negative, as well as positive or neutral, effects. To avoid doing harm, people are looking more closely at the programs they put in place. Take, for example, Project ALERT. Designed to reduce smoking among seventh and eighth grade students, this curriculum was evaluated in schools across the country and shown to be quite effective with most populations. But, when adolescent male smokers were exposed to the program's Tobacco Unit, their smoking rates actually increased. Research revealed an unintended "backlash" effect: The boys in this particular group reacted to the curriculum's negative portrayal of tobacco users by smoking more. Programs must meet a number of criteria in order to be deemed "evidence-based." These criteria differ somewhat by each of the federal agencies that use them. In general, for a program to qualify as evidence-based, programs and strategies must:

- Be based on theory
- Produce positive outcomes
- Continue to produce positive effects over time
- Have the capacity to be replicated and disseminated.

## Reference

CSAP'S Northeast Center for the Application of Prevention Technologies. (2001). What's Science Got to Do with It? Newton, MA: Education Development Center, Inc.